Bupropion (Wellbutrin®)

This sheet is about exposure to bupropion in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

What is bupropion?

Bupropion is a medication used to treat depression and seasonal affective disorder. It is sold under the brand name Wellbutrin®. Bupropion is also sold under the brand name Zyban® as an aid to quit smoking.

Sometimes when people find out they are pregnant, they think about changing how they take their medication, or stopping their medication altogether. However, it is important to talk with your healthcare providers before making any changes to how you take this medication. Your healthcare providers can talk with you about the benefits of treating your condition and the risks of untreated illness during pregnancy.

If you plan to stop this medication, your healthcare provider may suggest that you slowly lower the dose instead of stopping all at once. Stopping this medication suddenly can cause some people to have withdrawal symptoms. It is not known if or how withdrawal might affect a pregnancy. Some people may have a return of their symptoms (relapse) if they stop this medication during pregnancy. Untreated mental illness might also affect a pregnancy. For more information, see the fact sheet on depression at https://mothertobaby.org/fact-sheets/depression-pregnancy/.

I take bupropion. Can it make it harder for me to get pregnant?

Studies have not been done to see if taking bupropion could make it harder to get pregnant. Two cases of irregular menstrual cycles linked to bupropion use have been reported. However, these case reports did not mention fertility problems.

Does taking bupropion increase the chance for miscarriage?

Miscarriage can occur in any pregnancy. Based on the studies reviewed, it is not known if bupropion increases the chance for miscarriage. Two studies did not find a higher rate of miscarriage among people who were pregnant and taking bupropion compared to the background chance for miscarriage in the general population.

Does taking bupropion increase the chance of birth defects?

Every pregnancy starts with a 3-5% chance of having a birth defect. This is called the background risk. Based on the studies reviewed, it is unlikely that using bupropion during pregnancy would increase the chance for birth defects above the background risk.

One study has suggested a weak link between use of bupropion in the first trimester and heart defects. The design of this study does not allow a conclusion to be drawn. Other studies involving over 2,300 pregnancies exposed to bupropion in the first trimester showed no increase in the chance for birth defects.

Does taking bupropion in pregnancy increase the chance of other pregnancy-related problems?

Based on the studies reviewed, it is not known if bupropion increases the chance for pregnancy-related problems such as preterm delivery (birth before week 37). In a small study of 30 people who were pregnant and were given bupropion for 12 weeks to help them quit smoking during pregnancy, no differences in birth weight, length, head circumference, or Apgar score (grading system in newborns to define their wellbeing) were seen.

I need to take bupropion throughout my entire pregnancy. Will it cause withdrawal symptoms in my baby after birth?

The use of antidepressants during pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Some infants who were exposed during pregnancy to other antidepressants near the end of pregnancy have had withdrawal symptoms like irritability, jitteriness, trouble sleep disturbances, or trouble eating. Researchers have never looked at the chance for withdrawal in babies exposed to bupropion late in pregnancy. Babies who have been exposed to any antidepressant drug during pregnancy can be watched for signs of withdrawal after delivery.

Does taking bupropion in pregnancy affect future behavior or learning for the child?

Based on the studies reviewed, it is not known if bupropion increases the chance for behavior or learning issues for the child. One study has suggested an association between prenatal exposure to bupropion and attention deficit hyperactivity disorder (ADHD). There are many factors that contribute to ADHD and more information is needed before a link can be made.

Breastfeeding while taking bupropion:

Bupropion gets into breastmilk in small amounts. Taking bupropion while breastfeeding is not be expected to cause negative effects in most breastfeed infants.

There are two case reports of 6-month-old babies exposed to bupropion through breast milk who then had seizures. The seizures stopped when the person who was breastfeeding stopped taking bupropion. Those who are starting the medication for the first time while breastfeeding can monitor their child closely for side effects. If you suspect the baby has any symptoms (including seizures or being more sleepy than usual), contact the child's healthcare provider.

In some people, bupropion can reduce the amount of milk their bodies make. If you notice this, please tell your healthcare provider. Be sure to talk to your healthcare provider about all of your breastfeeding questions.

If a male takes bupropion, could it affect fertility (ability to get partner pregnant) or increase the chance of birth defects?

Studies have not been done to see if bupropion could affect male fertility or increases the chance of birth defects above the background risk. In general, exposures that fathers or sperm donors have are unlikely to increase the risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

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